

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Aug 27, 2003 8:00 am**  
**Secretary of State**

08-27-2003 90080 004 \*\*\*550.00

**DOCUMENT # P93000046835**

**1. Entity Name**  
**GFV CONSTRUCTION COMPANY**



**Principal Place of Business**

**1833 BANANA RD**  
**LAKELAND FL 33810**  
**US**

**Mailing Address**

**1833 BANANA RD**  
**LAKELAND FL 33810**  
**US**

**2. Principal Place of Business**

**4535 Meadowview**  
**Drive**

**3. Mailing Address**

**4535 Meadowview**  
**Drive**

**City & State**

**Lakeland, FL**

**City & State**

**Lakeland, FL**

**Zip**

**33810**

**Country**

**US**

**Zip**

**33810**

**Country**

**US**

**4. FEI Number**

**59-3196421**

**Applied For**

**Not Applicable**

**5. Certificate of Status Desired**

☐

**\$8.75 Additional**  
**Fee Required**

**6. Name and Address of Current Registered Agent**

**7. Name and Address of New Registered Agent**

**REID, VICKIE E**

~~**1833 BANANA RD**~~ **4535 Meadowview DR**  
**LAKELAND FL 33810**

**Name**

**Street Address (P.O. Box Number is Not Acceptable)**

**City**

**FL**

**Zip Code**

**8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.**

**SIGNATURE**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

**DATE**

**FILE NOW!!! FEE IS \$550.00**

**After September 10, 2003 Fee will be \$750.00**  
**Make Check Payable to Florida Department of State**

**9. Election Campaign Financing**  
**Trust Fund Contribution.**

☐

**\$5.00 May Be**  
**Added to Fees**

**10. OFFICERS AND DIRECTORS**

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

**TITLE** **VP** ☐ Delete  
**NAME** **GOODSPEED, CLIFF**  
**STREET ADDRESS** **185 GUADALUPE HILLS LN**  
**CITY-ST-ZIP** **SEGUIN TX 78155**

**TITLE** ☐ Change ☐ Addition  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**TITLE** **ST** ☐ Delete  
**NAME** **REID, VICKIE E**  
**STREET ADDRESS** **1833 BANANA RD**  
**CITY-ST-ZIP** **LAKELAND FL 33810**

**TITLE** ☐ Change ☐ Addition  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**TITLE** **P** ☐ Delete  
**NAME** **GOODSPEED, HANNELORE**  
**STREET ADDRESS** **185 GUADALUPE HILLS WAVE**  
**CITY-ST-ZIP** **SEGUIN TX 78155**

**TITLE** ☐ Change ☐ Addition  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**TITLE** ☐ Delete  
**NAME**  
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**CITY-ST-ZIP**

**12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.**

**SIGNATURE:**

**VICKIE E REID**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**7/9/2003**

Date

**863 - 858-8774**

Daytime Phone #

CR2E034 (4/03)